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ABSTRACT

This paper describes a strategy for the development of Parent-Child Development Centers (PCDCs) directly involving parents in preschool programs for children up to three years of age. The five-part strategy has been implemented through: (1) a proposal phase, for three comprehensive-program centers for low-income families and (2) a four-year model-development, implementation and evaluation phase, and is now in (3) a replication phase for programs in new sites. Remaining phases will provide for (4) external evaluation of programs and (5) overall assessment of results, prior to wider dissemination. The three original PCDCs are described. Birmingham and New Orleans programs, described briefly, are center-based, with children from 2-3 months to three years of age. The Houston PCDC is described in detail. Involving urban Mexican-American families, the two-year program begins at the age of one year with home-based mother and family involvement. The second year, for two-year-olds, is center-based, with a bilingual staff. Common elements are seen in evaluations of all three centers. (Approximately 80 to 100 experimental subjects and comparable numbers of controls are involved for each center.) At the end of a program, significant intellectual differences were found, with program children ahead of controls in general intelligence, language development and conceptual usage. Significant evaluation results have been obtained with mothers, their behavior meeting desired goals in all three centers. Houston program mothers, compared with controls, showed more positive behavior and obtained higher scores related to the home as a learning environment. (BF)

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PARENT EDUCATION AND THE EDUCATIONALLY DISADVANTAGED CHILD[1]

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In the 1960's, American psychologist's directed their attention to the problems of poverty in America and especially to the often noted disparity in educational achievement between social class levels. This disparity was then--and still is--one of great magnitude. For example, the Coleman study of Equality of Educational Opportunity found that for sixth graders, there was a two year difference in test achievement between the highest and lowest social class quartiles (Okada, Cohen & Mayeske, 1972). This same disparity has been found on measures of learning aptitude or intelligence. The Stanford-Binet results reported recently by Broman, Nichols and Kennedy (1976) for 26,000 four-year-olds are representative. For white children, those in the lower social class quartile were 15 IQ points lower than those in the upper quartile and for Black children, the same comparison yielded a difference of 10 IQ points. These are social class differences of about one standard deviation and therefore highly significant in every sense of the word.

The concern of the time with improving the condition of the poor and increasing the poor child's educability led to the creation of a large number of special programs, among which were many intended to provide preschool compensatory education. Of these, Head Start is most famous and largest. These were primary prevention efforts with children at risk educationally.

These compensatory educational efforts produced similar results when evaluated. Children who had participated scored higher than controls at the end of the program, but, when the same children were followed into school the group differences tended to disappear. It became apparent that continuity of enriched educational experience was needed.

It is worth noting that in designing these programs a decision was made to have especially trained teachers, professional or paraprofessional, worth with the child. The choice could have been made to work with the parents of children, but it was not. Just why this occurred is not clear, but of course the body of evidence on the role of the family in determining educational achievement was less solid then than now and educational goals for children were blended, perhaps confused, with a desire to provide day care so mothers could work.

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But the basic reason, I think, has to do with the ideological context that psychologists and educators were immersed in at the time. It was one of expecting that effective change would take place only if the professional worked directly with the child. This does not preclude work in groups, it is the professional's direct line of contact that is at issue. The child is viewed as having certain strengths and weaknesses that are more or less enduring over time. By working directly with that individual, the strengths could be maximized. The person's embeddedness in a matrix of environmental forces was acknowledged, but not seriously regarded. Only recently has serious consideration been given to the person's environment as an enduring, constant influence on his behavior. By seriously, I mean trying to understand the nature of this ecological influence and attempting to change it for the child's benefit.

Support for the idea that one can most effectively influence the young child's learning potential by working with the parents comes from several different sources. First, there is the fact that for most children the most consistent, intense and pervasive influence in life comes from the parents. Furthermore, it is in the primary socialization setting that the family not only provides stimulation and control, but actually defines the world for the child. We see from the work of Bernstein and his followers (Bernstein, 1971) that the family also provides the linguistic and cognitive tools for apprehending the world altogether.

There is also empirical evidence supporting the family's influence. The research of Hayes and Grether (1969) and of Soar and Soar (1969) is typical. These researchers have compared the standing of children of low and middle social class on their achievement scores before and after summer vacation. Middle class children continue to gain over the vacation period, but lower class children stand still or lose points. Achievement here is clearly not a function of the school. Again, the need for continuity of training is apparent.

The influence of the family as compared with the quality of schools has been documented by Mayeske et al (1973) using Coleman study data on many thousands of school children. They report that for all ethnic groups combined, "...48 percent of achievement was associated with Family Background, 21 percent with School Characteristics and 32 percent with both" (p. 13).

Another kind of evidence is to be found in the studies of the development of child competence. In preparing the set of goals for the Houston Parent-Child Development Center we reviewed the literature on parent-child relationships and child competence. We looked at both predictive studies where parental behaviors early in the child's life were related to the child's later performance and at concurrent studies of parent behavior and child functioning. The literature on these matters is now substantial and to a surprising degree consistent. Without taking time to cite the sources of evidence or to offer any commentary on the research methods, I can quickly summarize the principal findings: The recurring theme in the parent-child interaction research is that competence is enhanced when parents:

1. Are warm or affectionate.
2. Use positive reinforcement.
3. Encourage the child's verbalization.
4. Exert control that uses reasoning and is not too restrictive.

Altogether, the evidence seems overwhelming for including the parents in preschool educational efforts whenever possible.

In the late 1960's a few educational researchers realized the importance of influencing the child's learning abilities through the parents. These pioneers were Susan Gray, Dave Weikart, Ira Gordon, Merle Darnes, Phyllis Levenstein, and Richard Dunham. They began working with parents of disadvantaged children in ways that deserve to be called innovative in that they, for the first time, emphasized parent education in concrete, realistic settings rather than in more abstract group discussions with children tidily kept away. They have contributed enormously to the field in their development of educational techniques, tests of such questions as how long programs need to be and at what age they are of most value, and in their demonstration that parent education programs can achieve long-lasting effects. These programs included evaluation, with control groups and follow-up studies. It must be said, however, that with few exceptions the evaluation designs were flawed to such an extent that solid conclusions cannot be drawn. There was little use of random assignment to groups, the numbers involved were often very small, and the independent variable, the training itself, was typically not well described. Nevertheless, taking the results with some reservations, we still find differences between the lasting effects of these parent-oriented programs and the child-oriented programs that were active at the same time. The test scores of children whose parents were trained tend to rise and stay up at levels that would seem to enhance the likelihood of school success, instead of declining after the special program ended.

The continuing need for early educational programming and the tentative success of the pioneer programs raises difficult policy questions. Should public funds be spent on parent-education in an attempt to upgrade the educational achievement of young children? Should vast programs, such as Head Start, or even larger, be instituted? Should parent education be supported at the expense of other approaches? These questions and others are being seriously considered now at the national, state, and local levels of government. If rational research-based decisions are to be made, they must be made on more than demonstration projects or on programs that have had inconclusive evaluationa. Much sounder sources of data are required and to attain these, new more extensive approaches to program development are needed.

A strategy for developing effective parent education programs was devised in 1969 by Mary Robinson, then a program officer for the Office of Economic Opportunity and now in the same role with the Office of Child Development. The success of the Parent-Child Development Center programs is clearly a matter of her insight into the nature of the problem, initiative in developing a program strategy, and persistence in maintaining the necessary standards of quality.

The strategy has five parts:

1) A number of developmentally oriented groups would be invited to write proposals for the Parent-Child Development Centers. Originally there were to be 10 centers, but budget cuts quickly reduced the number to three. There were certain general requirements for the centers--all were to focus on the low-income family, on families with a child under three years of age, and the programs were to be compre-

hensive; that is, offering a variety of supportive services in the medical and social welfare areas to to families in need.

2) Each group would be allowed four years to develop a model, put it into practice, and evaluate the program's early effectiveness. The models were to be developed from available research evidence on parent-child relationships and parent education. Each was to have carefully stated goals and clear links between and program elements.

3) When these programs were developed and evaluated they would be replicated in new sites. This phase would also call for a new level of management and a Replication Management Organization was included to oversee the entire replication procedure making sure that the essential features of each model were faithfully included and implemented in the new sites.

4) Another new element is also required. That is the external evaluation of the programs, both original and replications. Scientific objectivity requires that those who have developed programs and are emotionally invested in their success, not be required to evaluate their effectiveness.

5) Finally, the plan calls for an overall assessment of the results. If they appear solid, the programs will be announced as ready for wider dissemination.

This unique strategy of program development has been followed carefully and the programs are now in the replication phase. The three existing model centers in Birmingham, New Orleans, and Houston have developed programs and evaluated them. Curriculum materials have been prepared in detail, staff have been trained, process measurement procedures have been instituted to assure the continued quality of the programs, and quite importantly, significant numbers of families have completed the programs.

The Replication Management Organization is the Bank Street College of Education. New sites are active in Indianapolis, Detroit and San Antonio and others will be selected this coming year.

The external evaluation unit is yet to get under way. So far, evaluation designs have been drafted and program evaluation is expected to change from internal to external early next year.

It is now time to say more about the programs themselves, beginning first with the program in Birmingham.[2]

Birmingham

The Birmingham program is entirely center-based with the mother and child entering at child age 3 months. The program is organized around three nurseries. Mothers remain with their children in the first two nurseries and leave them to work with other mother's children in the last nursery when the children are 18 to 36 months of age.

A very important feature is that virtually all of the teaching is done by mothers. They enter as Participant Mothers and continue in this observer-participant role until their baby is 15 months old. Then, there is a gradual transition with increasing responsibilities and the mothers assume the role of Model Mother I. This is a paid staff position and the mothers are now teachers as well as learners.

In another 3 months, at her request and on staff recommendation, she may move to the Model Mother II role with higher pay and more teaching responsibilities. Finally, a few mothers move into a still

higher position for the last few months of their participation in the program. Two basic assumptions underlying this program are that mothers learn best when they teach others and that the mother's social relationships are as important as the child's.

New Orleans

The New Orleans program was designed to compare two different parent education approaches using essentially the same curricula. Some mothers were visited in their homes by teachers while others attended sessions at the center. All participated from child age 2 months to 36 months.

As the early evaluation results have shown no apparent effectiveness for the home visiting program and it has now been discontinued, I will describe the Center program only.

This model includes four elements:

1) Child Development Discussion. Information on child development is communicated to mothers in a group discussion setting. Mothers share experiences and work through their understandings of child rearing processes.
2) Parent-Child Laboratory. Actual practice in learning child management skills is developed in this mother-child group setting.
3) Home Resource Workshop. This discussion setting emphasizes ways in which the mother can develop the home as a learning environment. It also stresses ways to carry learning from the Center to the home.
4) Parent Development. This is largely concerned with the personal development of the parent herself and is made up of many different elements. These include home economics classes, child and maternal health education, High School Equivalency Diploma work, a community resource workshop, and social service counseling as needed.

Houston

I will describe the Houston program in somewhat greater detail because it is, of course, the program I know best.

The Houston model was designed for urban Mexican-American families and responding to the family values of this ethnic group meant including certain special features. For example, it was essential to involve the fathers since about 90% of the families have a father present and he is very much involved in the child's development. All staff members must be fluently bilingual. Also, in view of the Mexican-American emphasis on the role of the mother as homemaker, the program was designed to provide a home-based educational experience in the first year with a change to a center-based program for the second year.

When the child is one year of age, an In-Home Educator visits the home weekly for 30 weeks. The focus is on the development of the mother's skills in becoming an effective teacher of her child. The mother and Educator share their resources, with the mother contributing from her experience and knowledge ways in which she can promote the child's development in language, motor coordination, social relations, and self-esteem. Some toys and books are lent to the family, others are given to them and some are made by the mother. The mother and Educator find ways in which the child can experience the joy of learning. As the child explores a toy or book, they focus upon such questions as: What is the child learning? What else could be learned using this book or toy? How can such concepts as big and little, up

and down be learned? How can the mother use other objects in her home to teach the child such concepts? Thus the mother is helped to generalize such teaching into the home situation.

During this first program year, the entire family is involved periodically in family socials and workshops. Each family is invited to at least four family workshops, held at the Center for a full day on a weekend. The goal is to build the strengths of the family. Discussions and activities explore family communication, decision-making, problem-solving, and role relationships.

During the second program year, when the child is two, mother and child attend the Center four mornings each week. The children are involved in nursery school activities designed to promote their general development. Tutorial interactions are part of each daily session.

The mothers' curriculum is divided between work with their children and adult sessions. Half of the adult sessions center on home management activities such as health, nutrition, consumer purchasing, and sewing.

The other adult sessions are devoted to child development. The mothers discuss such topics as discipline, children's self-concept, and the promotion of children's learning. Mothers become aware of the effects they have upon the child's present and future development. In small group discussions, the mothers share from their experiences with the Child Development Educator facilitating discussion and occasionally supplying information from research and practice.

One educational procedure used is microteaching. In this, each mother and child pair is videotaped using toys and books. The mother helps the child explore and learn. She views the tape first, and then, with her permision it is shown to the other mothers. Discussion centers upon the positive things the mother does to help her child learn and to enjoy learning.

Evening sessions are held twice monthly with fathers and mothers attending together. Parent selected topics range from consumer buying and program purposes and practices to resources they can use in the community. Emphasis is also placed upon communication with the public schools so that the schools can better meet their children's needs.

Bilingual language activities are important as all of the parents speak Spanish, but many do not yet speak English. The language training approach for the children differs from that taken with the parents. For children, the emphasis is on developing competence in one language, whichever is preferred by the parents. Second language training is made available to the mothers in classes and embedded in the home management curriculum. Thus, the goal has not been to impose English, but rather that communication skill be developed in both Spanish and English.

Evaluation Methods

Certain features of the three PCDC's program evaluation were similar even though they did not all use the same testing and interviewing procedures. The common elements are:

1) Random assignment to experimental or control groups.
2) Analysis of the results of randomization and attention to differential attrition of subjects.

3) Careful attention to the child's comfort in assessment situations.
4) Measures of change in mothers as well as in children.
5) An emphasis on behavioral as contrasted with verbal-attitudinal measures, although both types of measures were used.
6) Relatively large numbers of subjects.

Results

Taking the child results first, at program's end at child age three, the three PCDC's have found significant intellectual differences. All three centers have used the Stanford-Binet and have found differences favoring the experimental subjects. The numbers involved run to about 80-100 experimentals and comparable numbers of controls in each center. New Orleans and Houston have also used Palmer's Concept Familiarity Index and have obtained significant group differences. On a variety of tests, program children have been ahead of controls in general intelligence, language and conceptual usage.

The most impressive evaluation results have been obtained with the mothers, especially the videotaped records of mother-child interaction in free play and structured task sessions. Each of the Centers used this procedure in a roughly similar way, but each adopted somewhat different rating or coding procedures and obtained different measures of mother and child behavior. Each Center selected its measures to fit its program goals.

The first summary statement that can be made is that mother behavior met desired goals in all three centers.

For Birmingham, program mothers asked more questions of their children, looked at them (as opposed to looking around the room) and did more noncontrolling talking than did control mothers.

In a comparable situation, New Orleans experimental mothers obtained higher scores on an index of "good mothering" which was made up of scales measuring acceptance, sensitivity, cooperation, use of positive language, and use of positive techniques. Not only were program mothers much higher on this index at program's end, but the annual measurement procedure showed a steadily increasing difference between the two groups over time.

The Houston program mothers, compared with controls, in a group by time analysis, were more affectionate, used praise more, used more nonrestrictive control, reasoned more and were more encouraging of the child's verbalization.

Houston program mothers also obtained higher scores on Caldwell's observational and interview measure of the home as a learning environment.

Some follow-up results are available for children at ages 4 and 5. The sample sizes are quite small and I think it is too soon to draw any conclusions, but it does appear that there has been no decline in functioning of the children as measured by the various intelligence tests used.

There are other results but time does not permit description of them. Suffice it to say that in nearly every instance the program mothers and children have differed from controls in expected ways.

At this point, following conventional practice of the past decade, these programs would be regarded as ready for wider dissemination:

program goals have been met, reliable differences have been obtained between program families and randomly assigned controls and program materials have been prepared. But, actually, this demonstration marks only the end of the first phase. A critical test yet remains, that of determining whether programs can actually be replicated and whether comparable results will be obtained. This test is now in process, but the answer is yet several years away.

The cost of the PCDC strategy is great in terms of time and money, but the effort is essential for adequate parent education program development. There are many questions yet remaining about the efficacy of of parent education as a primary prevention procedure and they too will be answered only with careful program development and evaluation.

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Footnotes:

[1]Paper presented in a symposium entiled "Psychologists and parents: the new team", at the American Psychological Association Convention in Washington, D. C., September, 1976.

[2]Details about the programs are available from the following sources:

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